									Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								15 HS 37.400							
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAT							
T	OTAL CLAIMS	· .	40				•	RATE		FEE	1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	ΈÉ	385.00	OR	Basic Fee	770.00°		
TOTAL CHARGEABLE CLAIMS			4 Ominus 20=		• 20			X\$ 9	•		OR	X\$18=	360		
INI	DEPENDENT C	LAIMS .	0 minus 3 =		· a		٠	X43=			OR	X86≈	0		
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=			1	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2							·	TOTAL			OR	TOTAL	. 0		
	C	OTHER THAN													
. (Column 1) (Column 2) (Column 3)									CHALL CHENTY OF CHALL CAPERLY						
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE/		RATE	ADDI- TIONAL FEE		
Š	Total	• 34	Minus	→ 40	1	- /		XS 9-			OR	X\$18=			
AME.	Independent	• 2_	Minus	*** 3		= /		X43=	1	7	OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									7	OR	+290=			
· / /									ΨĮ.	/ 		TOTAL	/		
W/(6/06 (Column 1) (Column 2) (Column 3)															
ENT B		CLAIMS REMAINING AFTER AMENDMENT	·	HIGH NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE		ADDI- FEE		RATE	ADDI- TIONAL FEE		
AMENDIMENT	Total	. 37	Minus	** 4	60.	- /		X\$ 9=	5	. [OR	XSTE	}		
ME	Independent	ependent • 5 Minus ••• ST PRESENTATION OF MULTIPLE DEPENDENT			3	-2	lt	X	2	•/	OR	X86=	400		
	FIRST PRESE	NTATION OF ML	ILTIPLE DEI	PENDENT	CLAIM	()	!	+145=	†		OR	+290=			
							L	TOTA		+		TOTAL	CIRC		
	(Column 1) (Column 2) (Column 3)									7	<u> </u>	VOOT. FEE	. 4		
ENTC	`	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE		ADDI- IONAL FEE	. [RATE	ADDI- TIONAL FEE		
2	Total	•	Minus	**		<u>-</u>		X\$ 9=	T		OR	X318=			
AMENDMENT	Independent	•	Minus	***		•		X43=	t		OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								t			.200			
• #	H the entry in column 1 is less than the entry in column 2, write "0" in column 3. H the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										OR [+290=			
•	the Highest Nu	mber Previously Pa mber Previously Pa ber Previously Paid	ld for IN THE	S SPACE is	less that	3, enter 3." ·		YOTAL DOIT. FEE Id in the a	L		•	DOTT. FEE			
ORM	PTO-678 (Rev. 10	103		•		• •	Pater	st and Trad	mg	e Office, V.	. DEP	ATMENT OF	COMMERCE		
		•	•	•		• •		•	•			•	•		